Application or Docket Number
09, 751, 835

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	20	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	20 minus 20=	0
INDEPENDENT CLAIMS	6 minus 3 =	3
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

	SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
	RATE	FEE		RATE	FEE
BASIC FEE	BASIC FEE	355.00	OR	BASIC FEE	710.00
	X$ 9=		OR	X$18=	—
	X40=		OR	X80=	240
	+135=		OR	+270=	—
	TOTAL		OR	TOTAL	950

CLAIMS AS AMENDED - PART II

8-1-09

IFWardt 1-14-05

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	22	Minus	20	2
Independent	5	Minus	6	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	X$ 9=		OR	X$18=	36.00
	X40=		OR	X80=	
	+135=		OR	+270=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	36.00

Charge on 4/18/05

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	28	Minus	22	6
Independent	7	Minus	6	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	X$ 9=		OR	X$ 50=	300.00
	X40=		OR	X 200=	200.00
	+135=		OR		
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	500.00

4/6/06

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	28	Minus	28	
Independent	7	Minus	7	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	X$ 9=		OR	X$18=	
	X40=		OR	X80=	
	+135=		OR	+270=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875
(Rev. 8/00)

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